



Application Date: _____ Record #: _____
 (Office Use Only)

Business Owner/Tenant Name: _____ Phone#: _____

Project Address: _____
 Street City State Zip

Address for
 Permit to be sent: _____
 Street City State Zip

Property Owner: _____ Phone#: _____

Address of
 Property Owner: _____
 Street City State Zip

Township: _____ Parcel #: _____

Subdivision: Lot: _____ Zoning: _____

Parcel Type: Industrial _____ Residential _____ Commercial _____ Agricultural _____

Do you have public water? Yes _____ No _____ Do you have public sewer? Yes _____ No _____

Are you on a corner lot? Yes _____ No _____

Type of Temporary Use? _____

Structure Size: Width: Length: Height Total square footage: _____

| | | | |
|-------------------------|--|------------------------|--|
| Street Frontage (ft) | | Stake Date: | |
| Front setback (ft) | | Estimated. Start Date: | |
| Rear Setback (ft) | | Estimated End Date: | |
| Left Setback (ft) | | | |
| Right Setback (ft) | | | |
| Height Above Grade (ft) | | | |

Signature of Applicant _____

Please draw a sketch including the following:

- 1. Indicate the structure and how far away it sits from property lines.**
- 2. Show other structures on parcel and distance way from proposed structure.**
- 3. Show where the driveway is/will be located.**

Please indicate the North point.